

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Wsp</i>		3/23/00
O.I.P.E. CLASSIFIER		43	3/29/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>WSP</i>	70303	5-15

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Best Available Copy

Claim	Date
Final Original	
1	2/28/02
2	3/2/02
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